

INSTRUCTIONS FOR THE MONTHLY CENSUS SUMMARIES (AU 3902:1/98)

Monthly census summaries are confidential and are not for public disclosure.

There are three separate monthly census summaries. One is for reporting nursing facility (NF) and nursing facility-mental health (NF-MH) resident days. The second is for reporting resident days for other types of residential living facilities (IE assisted, living, residential health care, etc.) with shared NF or NF-MH costs. The last is for reporting adult day care hours.

The monthly census summaries are available on the Kansas Department on Aging website at <https://www.kdads.ks.gov/provider-home/forms>, under the Nursing Facility Financial and Statistical Report Forms heading. The census summaries can then be submitted to KDADS.COSTREPORTS@ks.gov.

The forms are titled Monthly Census Summary Report. There are three separate summary tabs in the report for the NF and NF-MH resident days, Other residential days with shared NF and NF-MH costs, and Day Care hours. Clicking on a tab will activate that specific worksheet. Each completed form should include the name of the facility, provider number and report year. The new forms are effective beginning January 1, 1998.

The following are additional explanations for the three forms:

NF and NF-MH Monthly Census Summary

A monthly summary of days for each resident will be reported. **A resident day is being defined as any paid day.** Resident days will include full paid days, reserve paid days and all other types of paid days. The NF and NF-MH staff are responsible for keeping documentation to support the monthly summaries reported for the residents.

The census summary form has two columns for each month. One column is for reporting Medicaid days. The other column is for reporting all other resident days, hospice (including Medicaid hospice days), Medicare, private pay, Veterans Administration, etc. The last three columns of the electronic version represent the resident yearly totals which are calculated automatically.

There are ten pages of the electronic version of the monthly census summary for the NF and NF-MH program, or 250 lines for resident names. This should accommodate the facilities with over 200 beds. If more lines are needed, please make copies of the form to list additional resident names and days.

Other Residential Days With Shared NF Costs

As a general rule, whenever assisted living, residential health care or other residential care facility costs are reported on the cost report, the monthly census summary for these other types of residential days must be maintained. In this situation, there would be cost allocations reported for the other non-NF and NF-MH residential operations. If a provider operates an assisted living complex and a nursing facility, but they do not share costs and keep separate accounting records for each operation, the provider would not be required to complete and submit the monthly census summary for the assisted living complex.

A monthly summary of days for each resident should be reported. **A resident day is defined as any paid day.** Each month on the form has two columns. One column is for reporting days when the resident is receiving Medicaid funded Home and Community Based Services (HCBS). The other column is for reporting days for all other residents not receiving Medicaid HCBS services.

There are two pages of the monthly census summary for Other Residential Days With Shared NF Costs, or 50 lines to list resident names. If more lines are needed, please copy additional pages. If the spreadsheet software is used, the resident yearly totals are calculated automatically.

Day Care Hours

The NF and NF-MH providers with adult day care programs are required to report the day care hours. Per Kansas Administrative Regulation (KAR) 30-10-28, 18 hours of day care and day treatment shall be counted as one resident day. The total day care hours are used to convert to full day equivalents.

There are two pages of the monthly census summary for Day Care Hours, or 50 lines for listing the customers and total hours served each month. Please make copies of the form if additional lines are needed. The total column is calculated automatically.

Declaration of Preparer

A hard copy of the signed declaration statement shall be submitted with the census forms. The declaration of preparer statement is also available on the website. The declaration statement applies to all three census summaries. Please read the declaration statement before signing.

Conclusion

The monthly census summaries are submitted as supportive documentation for the resident days shown on the cost report forms. The period covered by the census summaries should coincide with the cost report period. Please refer to KAR 30-10-1a and KAR 30-10-28 for the definition and the reporting requirements for resident days. Providers have the flexibility to determine the reports and documentation they maintain to support the monthly census summaries.

If you have questions concerning the monthly census summaries, please call Steven Hime at (785) 296-2535 or via email Steven.Hime@ks.gov or KDADS.COSTREPORTS@ks.gov.